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Approved for use through 11/30/2005. OMB 0651-0035  
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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/004,281
Filing Date	October 31, 2001
First Named Inventor	Brent McKay
Art Unit	3622
Examiner Name	Lastra, Daniel
Attorney Docket Number	12275.0013

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☒ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☐ the attorneys/agents associated with Customer Number

NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

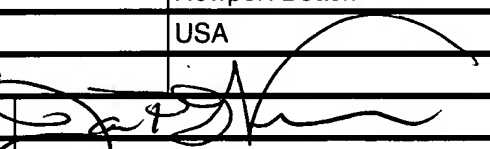
The reasons for this request are: Applicant's conduct renders it unreasonably difficult for the undersigned and his law firm to carry out the employment effectively.

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☒ Change the correspondence address and direct all future correspondence to:

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**OR**

<input checked="" type="checkbox"/> Firm or Individual Name	Brent McKay, c/o eMine Technology, Inc.				
Address	3901 Westerly Place, Suite 110				
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Country	USA				
Telephone				Fax	
Signature					
Name	Jan P. Weir	Registration No.	43,253		
Date	6/16/05	Telephone No.	949-725-4000		

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: Brent McKay  
Serial No: 10/004,281  
Filing Date: 10/31/01  
Docket No: 12275.0013

Examiner: Lastra, Daniel  
Group Art Unit: 3622

CERTIFICATE OF MAILING

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

I hereby certify that this paper is being deposited with the U.S. postal service as Express Mail No. EV 308794429 US with sufficient postage and is addressed to: Commissioner for Patents, PO Box 1450, Alexandria, VA 22313-1450. (37 CFR 1.8a)

Ann Wilson

TRANSMITTAL LETTER

Dear Sir:

Enclosed for filing are the following:

1. Request for Withdrawal as Attorney or Agent and Change of Correspondence Address;
2. Method of payment of fee:
  - ☒ To our knowledge, no filing fees are required
  - ☐ Attached is a check for \_\_\_\_\_
  - ☐ Charge Account 50-1329 in the amount of \_\_\_\_\_.
3. If any additional fees are due, please charge Account 50-1329; and
4. Return Postcard.

Please acknowledge receipt of these materials by stamping the date on the enclosed, stamped self-addressed card.

Respectfully submitted,

Dated: 6/16/05

Jan P. Weir, Esq.

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